



STATE OF TENNESSEE
DEPARTMENT OF HEALTH

JOHN J. DREYZEHNER, MD, MPH
COMMISSIONER

BILL HASLAM
GOVERNOR

March 22, 2017

Dear Colleague,

I appreciate your ongoing partnership with the Tennessee Department of Health (TDH) in protecting the health of our population. As you are aware, many countries in Latin America and the Caribbean are continuing to experience outbreaks of Zika virus disease, and local transmission continues in Miami, Florida and Brownsville, Texas. Tennessee has had 64 cases, all due to travel to other countries. Because of rapidly changing events and guidance I want you to be aware of the following:

- Zika virus testing (both serology and PCR) is available at our state and commercial laboratories. Guidelines on persons for whom testing may be appropriate are available at: [TDH Zika Decision Tree](#)
- Pregnant women should continue to avoid non-essential travel to areas with evidence of ongoing Zika transmission (<http://www.cdc.gov/zika/geo/index.html>). Pregnant women should either abstain from vaginal, anal or oral sex or use condoms and dental dams correctly every time throughout pregnancy if a male or female partner has traveled to an area of Zika transmission. Not sharing sex toys is also advised. It is important to note the virus may be transmitted by a partner who has been infected with the virus but never develops symptoms.
- A tool is now available to help healthcare providers apply updated recommendations for Zika testing, interpretation of results and clinical management for a pregnant woman. (<https://www.cdc.gov/zika/hc-providers/index.html>)
- All men with possible Zika virus exposure, regardless of symptom status, should not have any type of unprotected sex for at least six months after possible exposure. Women with possible Zika virus exposure are recommended to wait to conceive until at least eight weeks after symptom onset or last possible Zika virus exposure. (http://www.cdc.gov/mmwr/volumes/65/wr/mm6539e1.htm?s_cid=mm6539e1_w)
- Providers should counsel sexually active individuals who might be exposed to Zika virus regarding the risk for congenital Zika virus infection and prevention of unintended

pregnancies. (<http://fpntc.org/training-and-resources/zika-toolkit-for-healthcare-providers-version-3-providing-family-planning>)

- Reporting of neurologic birth defects (regardless of Zika exposure) is an essential piece of Zika surveillance. Reported cases will also be referred to early intervention, care coordination, and family support resources as appropriate, and outcomes will be followed. Infants born after January 1, 2017 with neurologic birth defects should be reported to <https://apps.health.tn.gov/ReportableDiseases>
- Providers should continue to screen for travel history during each visit with a pregnant patient and remind patients to avoid mosquito contact for 3 weeks upon return from a Zika affected area (<http://www.cdc.gov/zika/geo/index.html>).

Extensive additional resources are available at <https://tn.gov/health/topic/zika-virus>. You may also, as always, reach our state health department staff for urgent matters, at (615) 741-7247.

TDH is continuing to monitor travel-associated cases within our borders and providing educational information to Zika-infected persons and at-risk persons in their communities. Thank you for your ongoing contributions to public health in our state. I will continue to provide you with updates as relevant recommendations become available regarding testing and clinical management.

Sincerely,



John J. Dreyzehner, MD, MPH, FACOEM
Commissioner

5th Floor, Andrew Johnson Tower
710 James Robertson Parkway • Nashville, TN 37243
(615) 741-3111 • www.tn.gov/health
Appendix (Available in English and Spanish at <http://tn.gov/health/topic/zika-virus>)